	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 265 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
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$\overline{\rangle}$	NAME OF COMMITTEE (In Full) The Commonwealth PAC				
A. 3.	Full Name (Last, First, Middle Initial)  Mark Fuller  Mailing Address 155 Somerset St.  City  Belmont  FEC ID number of contributing federal political committee.  Name of Employer Monitor Group  Receipt For:  Primary General  Other (specify)  Full Name (Last, First, Middle Initial)  Ruthanne Fuller  Mailing Address 32 Suffolk Road  City  Chestnut Hill	State MA		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For:  Primary General Other (specify)	Occupation Homema Aggregate		Receipt	
<b>C</b> .	Full Name (Last, First, Middle Initial) John Gardner  Mailing Address 225 State Street, 5th Fl.  City Boston  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: Primary General Other (specify)	State MA  C  Occupation Retired Aggregate	Zip Code 02109	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
SUBTOTAL of Receipts This Page (optional)					
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